| | | | | | | | | | / | |
|--|--|---|--|--|---|---|--|--|----------------|--|
| 01 | P EMAY 18. 200 | | 029924773 D | | - | TOTAL | | 5 P. 1 | 7 | |
| | Complete and sen | d this form, together | vapplicabl | le fee(s), to | · Mail | Mail Stop ISST | 's andre | | ' | |
| | ريع 2006 ع | | - •• | (,, | | Commissioner P.O. Box 1450 | for Patents | | | |
| | | | | | 13 | Alexandria, Vi | rginia 22313-1450 | | | |
| € 7 | NSTRUCTONS: This 1 | orm should be used for to | namitting the 199 | TIE PER AN | or <u>Fax</u> | (571)-273-2885 | | | | |
| | All further confected | orrespondence including the | Patent, advance | orders and no | Diffication | CATION FEE (if re | Quired). Blocks 1 through 5 s will be mailed to the curre | should be complete at correspondence ac | d where | |
| <u> </u> | CURRENT CORRESPONDEN | ODS. | Manushaman a Cad bases | (c) apoutym | 5 h dew t | Note: A comit | Quired). Blocks 1 through 5 s will be mailed to the curre 385; and/or (b) indicating a se | parate "FEE ADDRI | ESS" for | |
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Blook 1 for any change of address | | | | y | | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate comnot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. | | | | |
| | 23906 | • | | | have its own certific | onal paper, such as an assignt ate of mailing or transmission | nent or formal drawii 1. | ig, must | | |
| | E I DU PONT D | COMPANY | | | _ | Militaria of Maria Maria | | | | |
| LEGAL PATENT RECORDS CENTER BARLEY MILL PLAZA 25/1128 4417 LANCASTER PIKE | | | | | | States Postal Service addressed to the M | bat this Fee(s) Transmittal is being deposited with the United rice with sulfdician postage for first class mail in an envelope Mail Stop ISSUE FEE address above, or being faceimile USPTO (571) 273-2885, on the date indicated below. | | | |
| | | | | | | transmitted to the US | | | | |
| | WILMINGTON, I | | | | Carol Reeder (Depositor's name) | | | | | |
| | Barbara C. | Siegell | | | | Carol | reedon | (3 | ignamre) | |
| _ | | | , | | | May 18, | 2006 | | (Dase) | |
| L | APPLICATION NO. | | FIRST NAMED INVENT | | | ATTORNEY DOCKET NO. | CONFIRMATION | NO. | | |
| Tre | 10/671,308 09/25/2003 | | | Takuya Konno | | EL0505 US NA | 5016 | | | |
| 11 | TE OF INVENTION: I | ERMINAL ELECTRODE | COMPOSITIONS | FOR MULTI | LAYER (| CBRAMIC CAPACI | DEATH / SOOF HDENESSS OF | 000036 041928 | 10671308 | |
| | | | | | | | | .00 DA | | |
| Г | APPLN, TYPE | SMALL ENTITY | I TORYER | | | <u>-</u> | 02 FC:1504 300 | .00 DA | | |
| <u> </u> | nonprovisional NO | | ISSUE FEE \$1400 | | PU | BLICATION FEE | TOTAL FEE(S) DUE | DATE DUE | | |
| | | | | | , | \$300 | \$1700 | 07/17/2006 | _ | |
| L | EXAMINER ART | | | | | ASS-SUBCLASS |] | | | |
| KOPEC, MARK T 1751 1. Change of correspondence address or indication of "Fee Address" (37 | | | | | 232-312000 | | | | | |
| Lu. | Cr. (1,003). | | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered across on | | | | | |
| | Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. | | | | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, | | | | | |
| "Foc Address" indication (or "Fee Address" Indication form | | | | (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | | | |
| | tomoca marciani eo. | | ı | listed, no | a patent a name will | momeys or agents. If be printed, | no name is 3 | | | |
| 3. A | SSIGNEE NAME AND | RESIDENCE DATA TO B | E PRINTED ON T | HE PATENT | (print or | typs) | | | | |
| 1 | ECOrdation as set forth in | on assignee is identified be 37 CFR 3.11. Completion | low, no assignee of this form is NOT | lata will app | ear on the | e patent. If an assign | nee is identified below, the d | ocument has been fil | ed for | |
| (| A) NAME OF ASSIGNI | E E | | (B) RESIDE | NCE: (CI | TY and STATE OR (| COUNTRY | | | |
| | E. T. du Po | nt de Name | | | | | · | | | |
| Ples | so check the annuariste | nt de Nemours | and Com | pany | Wil | lmington, | Delaware | | | |
| 4 | PL P WAR I A A | and good caregory or caregor | | | | الله Individual الله | opporation or other private and | oup entity Govern | ment | |
| 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): | | | | | | | | | | |
| Publication Fee (No small entity discount permitted) | | | | A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. | | | | | | |
| | | | | | or is here | by authorized by char | rge the required fee(s), or cred | dit any overpayment, i | 10 | |
| 5. C | hange in Entity Status (| from status indicated above) | | Dopositiv | xxomit 14f | Tilloer 19 4- 14-55 | (enclose an extra | a copy of this form). | _ _ | |
| Ļ. Trans | Ja. Applicant claims SN | IALL ENTITY status. See 3 | 7 CFR 1.27. | D. Applica | on ai tra | onger claiming SMAL | L ENTITY status. See 37 CF | R 1.27(g)(2). | | |
| NOT | E: The Issue Fee and Pu | requested to apply the Issue blication Fee (if required) w | Fee and Publication of the second of the sec | on Fee (if any from anyone |) or to re- | apply any previously | A BNITTY status. See 37 CF y paid issue fee to the applicat stered attorney or agent; or the | tion identified above. | | |
| micei | ear as shown by the recor | as of the United States Pater | it and Trademark C | Micc. | 1 | applicant, a tegri | stered attorney or agent; or the | e assignee or other par | rty in | |
| A | uthorized Signature/ | Carban C. | _ Dres | MI | | Date 24 | C-4-06 | | | |
| T | vped or printed name | Barbara C | Sie | rell | | Ponishati N | 30.686 | | | |
| This | collection of information | is required by 37 CFR 1.31 | . The information | s required to | obtain m | retain a henefit has th | te public which is to file (aud unutes to complete, including numents on the amount of tim frademark Office, U.S. Depar SEND TO: Commissioner for | h. d. Horaco | | |
| Sipu Sipu | thing the completed app | is governed by 35 U.S.C. I lication form to the USPTO | 22 and 37 CFR 1. Time will vary d | 14. This colle opending upo | ction is e n the ind | stimated to take 12 m | ninutes to complete, including | gathering, preparing | cess) and | |
| Box | 1450, Alexandria, Virgin | ia 22313-1450. DO NOT \$1 | end pe sent to the C END PEES OR CC | Dief Informa | tion Offic | cer, U.S. Patent and T TO THIS ADDRESS. | Frademark Office, U.S. Depar | tment of Commerce, | P.O. | |
| Unde | r the Paperwork Reduction | on Act of 1995, no persons a | rc remited to resec | affec a of her | rtion of:- | | · · · · · · · · · · · · · · · · · · · | or a success, F.U. BOX I | 430, | |

and a special state of 1993, no persons are required to respond to a collection of information unless it displays a valid OMB control number.